

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO.
10713981
APPLICANT(S)

FILING DATE

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEF	IND	DEF	IND	DEF
1						
2						
3						
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47						
48						
49						
50						
TOTAL IND.						

	IND	DEF	IND	DEF	IND	DEF
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52						
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54						
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98						
99						
100						
TOTAL IND.						

8
26
34